Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

|  |  | CLAIMS AS                                 | Column                          |                              | (Column 2)    |                  |         | SMALL ENTITY TYPE   |                        | OR     | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|--|--|---|---------------------------------|------------------------------|---------------|------------------|---------|---------------------|------------------------|--------|-------------------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | 5                               |                              |               |                  |         | RATE                | FEE                    |        | RATE                          | FEE                    |  |
| FOR  |  |   | NUMBER FILED                    |                              | NUMBER EXTRA  |                  |         | BASIC FEE           | 370.00                 | OR     | BASIC FEE                     | 740.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | 5 minus 20=                     |                              | *             |                  |         | X\$ 9=              |                        | OR     | X\$18=                        |                        |  |
| INDEPENDENT CLAIMS   |  |   | / mir                           | nus 3 =                      | * //          |                  |         | X42=                |                        | OR     | X84=                          |                        |  |
| MU   | LTIPLE DEPEN                                   | DENT CLAIM PI                             | RESENT                          |                              | •             |                  |         |                     | <b></b>                |        |                               |                        |  |
| * If   | the difference                                 | in column 1 is                            | less than zero, enter "0" in co |                              |               | column 2         |         | +140=               |                        | OR     | +280=                         |                        |  |
| CLAIMS AS AMENDED - PART II  |  |   |                                 |                              |               |                  |         | TOTAL               |                        | OR     | TOTAL                         | 740                    |  |
|  | C  | LAIMS AS A<br>(Column 1)                  | (Column 2) (Column 3)           |                              |               |                  |         | SMALL ENTITY        |                        |        | OTHER THAN OR SMALL ENTITY    |                        |  |
|  | Part Cara                                      | CLAIMS                                    |                                 | HIGH                         |               | 1 20.5 0)        | i (i    |                     |                        | ו ו    | <del></del>                   |                        |  |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT           |                                 | NUM<br>PREVIO<br>PAID        | BER<br>OUSLY  | PRESENT<br>EXTRA |         | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | * 5                                       | Minus                           | ** 8                         | 20            | =                |         | X\$ 9=              |                        | OR     | X\$18=                        |                        |  |
|  | Independent                                    | * /                                       | Minus                           | ***                          | 3             | =                |         | X42=                |                        | OR     | X84=                          |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                 |                              |               |                  |         | +140=               |                        | OR     | +280=                         |                        |  |
|  |  |   |                                 |                              |               |                  |         | TOTAL<br>ADDIT. FEE | <del>\</del>           | OR     | TOTAL<br>ADDIT. FEE           |                        |  |
|  | · .  | _ ′                                       | DDII.TEE                        |                              | J             | ADDIT CEL        |         |                     |                        |        |                               |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                 | HIGH<br>NUM<br>PREVI<br>PAID | IBER<br>OUSLY | PRESENT<br>EXTRA |         | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | * 4                                       | Minus                           | ** 5                         | PO            | =                | $\  \ $ | X\$ 9=              |                        | OR     | X\$18=                        |                        |  |
|  | Independent                                    | NTATION OF MAI                            | Minus                           | *** /                        | S CLAIM       | =                | $\  \ $ | X43=                |                        | OR     | X8&=                          |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |                                 |                              |               |                  |         | +140=               |                        | OR     | +280=                         |                        |  |
|  |  |   |                                 |                              |               |                  |         | TOTAL<br>ADDIT. FEE |                        | OR     | TOTAL<br>ADDIT. FEE           |                        |  |
| (Column 1) (Column 2) (Column 3)   |  |   |                                 |                              |               |                  |         |                     |                        |        |                               |                        |  |
|  | gen annia i a annia i annia i annia i          | CLAIMS                                    |                                 | HIGH                         | IEST          |                  | ] [     |                     | <u> </u>               | ı      |                               |                        |  |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT           |                                 | NUM<br>PREVIO<br>PAID        | DUSLY         | PRESENT<br>EXTRA |         | RATE                | ADDI-<br>TIONAL<br>FEE |        | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus                           | **                           |               | =                |         | X\$ 9=              | ,                      | OR     | X\$18=                        |                        |  |
|  | Independent                                    | *   | Minus                           | ***                          |               | =                | ]       | X42=                |                        |        | X84=                          |                        |  |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                 |                              |               |                  | ]       | 772=                |                        | OR     | A04=                          | <u> </u>               |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                                 |                              |               |                  |         |                     |                        | OR     | +280=                         |                        |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                                 |                              |               |                  |         |                     |                        |        |                               |                        |  |
|  |  | ber Previously Pai                        |                                 |                              |               |                  | er fou  | nd in the apr       | propriate box          | in col | lumn 1.                       |                        |  |